Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 1 of 68

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Michael	
		First name	First name
	Write the name that is on your government-issued		
	picture identification (for	Middle name	Middle name
	example, your driver's license or passport	Thompson	Look nome
		Last name	Last name
	Bring your picture identification to your	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	meeting with the trustee.	(,,,,,,	
2.	All other names you		
	have used in the last	First name	First name
	8 years	N.C. I. II.	Nº 1 II .
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
		Last Hario	Last Harie
3.	Only the last 4 digits of your Social	XXX - XX5974	XXX - XX-
	Security number or	OR	OR
	federal İndividual Taxpayer	9 xx - xx-	9 xx - xx-
	Identification number	3 44 - 44	3 vv - vv-

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 2 of 68

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Business name In Debtor 2 lives at a different address: Number Street Number Street Number Street Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street Number Street City State Zip Code City State Zip C	D	ebtor 1 Michael First Name	Middle Name	Last Name	Case number (if kn	own)	
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Include trade names and doing business as names							
and Employer Identification Numbers (EINI) you have used in the last 8 years Include trade names and doing business as names EIN EIN EIN EIN EIN Street Chicago Illinois 60637 City State Zip Code			About Debtor 1:		About Debto	or 2 (Spouse Only i	n a Joint Case):
Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name Business name Business name	4.	and Employer	I have not used any business	names or EINs.	I have no	t used any business na	ames or EINs.
Business name Business name Business name Business name		Numbers (EIN) you	Business name	,	Business nar	me	
EIN EIN EIN EIN EIN 5. Where you live 6554 S Greenwood Ave Number Street Chicago Illinois 60637 City State Zip Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 lives at a different address: City State Zip Code County If Debtor 2 is mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street Number Street Number Street City State Zip Code City State Zip Code Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		8 years	Business name		Business nar	me	
5. Where you live Street Street Street Street Number Street			EIN		EIN		•
6554 \$ Greenwood Ave Number Street Chicago Illinois 60637 City State Zip Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street Number Street City State Zip Code Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			EIN		EIN		
Number Street Number Street Number Street	5.	Where you live	255100		If Debtor 2 liv	ves at a different add	ress:
City State Zip Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number Street City State Zip Code City State Zip Code City State Zip Code Check one: Check one: Check one: Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.					Number	Street	
County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code City State Zip Code Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.					00	Old	7: 0: 1:
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street Str			•	Zip Code	City	State	Zip Code
above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street Street			County		County		
City State Zip Code City State Zip Code City State Zip Code City State Zip Code Check one: Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			above, fill it in here. Note that t	he court will send any	fill it in here.	Note that the court w	
6. Why you are choosing this district to file for bankruptcy Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			Number Street		Number	Street	
6. Why you are choosing this district to file for bankruptcy Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				7. 0. 1	011		7: 0
choosing this district to file for bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	_		City State	Zip Code	City	State	Zip Code
lived in this district longer than in any other district.	6.				Check one:		
I have another reason. Explain. (See 28 U.S.C. §§ 1408.)		to file for bankruptcy	lived in this district longer that	n in any other district.			
			I have another reason. Explain	n. (See 28 U.S.C. §§ 1408.)	I have and	other reason. Explain. (See 28 U.S.C. §§ 1408.)

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 3 of 68

Debtor 1 Michael		Thompson	Case number (if kno	own)
First Name	Middle Name	Last Name		
Part 2: Tell the Court Abo	out Your Bankruptcy Cas	se		
7. The chapter of the Bankruptcy Code you are choosing to file under		escription of each, see <i>Notice Re</i> o.). Also, go to the top of page 1 ar		C. § 342(b) for Individuals Filing for opriate box.
8. How you will pay the fee	more details about he cashier's check, or m may pay with a credit I need to pay the fee Individuals to Pay You I request that my fee judge may, but is not the official poverty lir	ow you may pay. Typically, if y noney order If your attorney it card or check with a pre-prine in installments. If you choose our Filing Fee in Installments (rebe waived (You may request required to, waive your fee, a ne that applies to your family son, you must fill out the Appli	you are paying the submitting you ted address. se this option, sign official Form 103 st this option only and may do so on size and you are to submit the submit of the su	the clerk's office in your local court for e fee yourself, you may pay with cash, ir payment on your behalf, your attorney on and attach the <i>Application for</i> BA). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9. Have you filed for bankruptcy within the last 8 years?	No. Yes. District District District	Wher	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	<u>W</u> her	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11. Do you rent your residence?	✓ No. Go to lir	ne 12.		o you want to stay in your residence? st You (Form 101A) and file it with

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 4 of 68

Debtor 1 Michael Thompson __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 5 of 68

Part 5: Explain Your Effor	rts to Receive a Brie	fing About Credit Counseling		
	About Debtor 1:		About Debtor 2 (Sp	pouse Only in a Joint Case):
15. Tell the court	You must check one:		You must check one:	•
whether you have received briefing about credit counseling.	counseling agen	ing from an approved credit acy within the 180 days before I ptcy petition, and I received a appletion.	counseling age	fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a mpletion.
The law requires that you receive a briefing		he certificate and the payment plan, veloped with the agency.		the certificate and the payment plan, eveloped with the agency.
about credit counseling before you file for bankruptcy. You must truthfully	counseling agen	ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion.	counseling age	fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion.
check one of the following choices. If you cannot do so, you are not eligible to file.		er you file this bankruptcy petition, opy of the certificate and payment		ter you file this bankruptcy petition, copy of the certificate and payment
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your	from an approve obtain those ser made my reques	ked for credit counseling services and agency, but was unable to vices during the 7 days after I at, and exigent circumstances amporary waiver of the	from an approve obtain those se made my reques	sked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the
creditors can begin collection activities again.	requirement, attac efforts you made t unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this	requirement, atta efforts you made unable to obtain i	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this
		e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.		e dismissed if the court is dissatisfied sfor not receiving a briefing before cruptcy.
	receive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.	receive a briefing must file a certific with a copy of the	sfied with your reasons, you must still y within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. so, your case may be dismissed.
		he 30-day deadline is granted only mited to a maximum of 15 days.		the 30-day deadline is granted only imited to a maximum of 15 days.
	I am not required counseling beca	d to receive a briefing about credit use of:	I am not require counseling because	d to receive a briefing about credit ause of:
	Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
	Active duty.	I am currently on active military duty in a military combat zone.	Active duty.	I am currently on active military duty in a military combat zone.
	about credit coun	are not required to receive a briefing seling, you must file a motion for ounseling with the court.	about credit cour	are not required to receive a briefing nseling, you must file a motion for counseling with the court.

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Mair Document Page 6 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Michael Thompson Signature of Debtor 1 Signature of Debtor 2 Executed on _ 4/28/2017 Executed on MM / DD / YYYY MM / DD / YYYY

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 7 of 68

Debtor 1 Michael		Thompson	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	er Chapter 7, 11, 12, c	r 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requi	red by 11 U.S.C. § 34	2(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	• •			dules filed with the petition is incorrect.
attorney, you do not	•	, ,		•
need to file this page.	/s/ Corey Walters		Date	4/28/2017
	Signature of Attorney for	or Debtor		IM / DD / YYYY
	g			
	Corey Walters			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone		Email address	cwalters@semradlaw.com
			Illinois	3
	Bar number		State	

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 8 of 68

Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Michael		Thompson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(State)	

	Check if	this	is	an
_	amende	d filir	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	·
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,000.00
1c. Copy line 63, Total of all property on Schedule A/B	\$7,000.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	•
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$88,560.71
Your total liabilities	\$88,560.71
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,560.63
5. Schedule J: Your Expenses (Official Form 106J)	

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 9 of 68

Debtor 1 Michael Thompson __ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,936.02 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$68,278.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$68,278.00

9g. Total. Add lines 9a through 9f.

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 10 of 68

Fill in this	inform	nation to identify your c	ase:				
Debtor 1		Michael			Thompson		
Debtor 1		First Name	Middle N	lame	·		
Debtor 2 (Spouse, if fil	ling)	First Name	Middle	lama	Lost Nama		
			Middle N	iame			
		nkruptcy Court for the:	Northern		District of Illinois (State)		
Case num (If known)	ıber						
Officia	ıl Fc	orm 106A/B			_		Check if this is an amended filing
Sched	dule	A/B: Prope	rty				12/1
category v responsibl write your	where e for s name	you think it fits best. E supplying correct infor and case number (if k	Be as complete a mation. If more s nown). Answer e	nd ad pace very	n asset only once. If an asset fits in more to ccurate as possible. If two married people is needed, attach a separate sheet to thi question. or Other Real Estate You Own or Hav	are filing together, both is form. On the top of any	are equally
1. Do you		or nave any legal or ed o to Part 2	quitable interest	ın an	y residence, building, land, or similar prop	perty?	
		Where is the property?					
1.1				Wh	at is the property? Check all that apply. Single-family home	the amount of any seco	claims or exemptions. Put ured claims on Schedule D:
1	Street	address, if available, or	other description	H	Duplex or multi-unit building	Creditors Who Have Cla	aims Secured by Property.
				Ħ	Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
					Manufactured or mobile home		
	Numb	per Street		Н	Land Investment property	Describe the nature of	of your ownership
				Н	Timeshare	interest (such as fee the entireties, or a life	
	City	State	Zip Code	H	Other		
				Wh	o has an interest in the property? Check	Check if this is co (see instructions)	ommunity property
					Debtor 1 only	Ш	
					Debtor 2 only		
					Debtor 1 and Debtor 2 only		
					At least one of the debtors and another		
					her information you wish to add about this perty identification number:	item, such as local	
If you	own o	r have more than one, li	st here:	•			
				Wh	at is the property? Check all that apply.		claims or exemptions. Put ured claims on <i>Schedule D:</i>
1.2	Street	address, if available, or	other description	Ш	Single-family home		aims Secured by Property.
			·		Duplex or multi-unit building	Current value of the	Current value of the
				Н	Condominium or cooperative Manufactured or mobile home	entire property?	portion you own?
				H	Land		
	Numb	per Street		Ħ	Investment property	Describe the nature of interest (such as fee	
	City	Ctata	Zin Codo		Timeshare Other	the entireties, or a lif	
	City	State	Zip Code		Other		
				Wh	o has an interest in the property? Check e.	Check if this is co (see instructions)	ommunity property
					Debtor 1 only		
					Debtor 2 only		
					Debtor 1 and Debtor 2 only		
					At least one of the debtors and another		
					her information you wish to add about this operty identification number:	item, such as local	

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 11 of 68

Debtor 1	Michael First Name	Middle Name	Thompson Last Name	Case number	(if known)	
1.3 Stre	eet address, if available, or o	Г	What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own?
Nu	mber Street / State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature of interest (such as fee s the entireties, or a life	imple, tenancy by
]]]]	Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an other information you wish to add property identification number:	nother	Check if this is co (see instructions)	mmunity property
	I the dollar value of the po ave attached for Part 1. W	ortion you own for a rite that number h	all of your entries from Part 1, incere.	luding any entries	s for pages	
	Describe Your Vehicle		in any vehicles, whether they are	e registered or no	t? Include any vehicles	
you own i	that someone else drives. If ans, trucks, tractors, sport u	you lease a vehicle, a	also report it on Schedule G: Execute	-	-	
3.1	Model: Year:	Saab 9-3 2005	Who has an interest in the proone. Debtor 1 only	pperty? Check	the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information: 2005 Saab 9-3		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community		Current value of the entire property? \$2800.00	Current value of the portion you own? \$2800.00
3.2	Make Model: Year:		who has an interest in the proone. Debtor 1 only	pperty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		Current value of the entire property?	Current value of the portion you own?

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 12 of 68

	Michael First Name	Middle Name	Thompson Last Name	Case number	er (it known)	
3.3	Make Model: Year: Approximate mileage:		Who has an interest in the one. Debtor 1 only	property? Check		red claims on Schedule ims Secured by Propert
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 or	nlv	Current value of the entire property?	Current value of the portion you own?
	Otrici information.		At least one of the debtor	•		
			Check if this is communications)			
3.4	Make		Who has an interest in the	property? Check	Do not deduct secured	
	Model: Year:		one. Debtor 1 only		the amount of any secu Creditors Who Have Cla	aims Secured by Propert
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 or	nlv	entire property?	portion you own?
			At least one of the debtor	•		
			Check if this is community instructions)	nity property (see		
Exar		· ·	er recreational vehicles, other t, fishing vessels, snowmobiles,	•		
Exar	mples: Boats, trailers, motors No Yes	· ·	er recreational vehicles, other	motorcycle accessori	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>
Exar	mples: Boats, trailers, motors No Yes Make Model: Year:	· ·	er recreational vehicles, other t, fishing vessels, snowmobiles, Who has an interest in the	motorcycle accessori	Do not deduct secured	red claims on <i>Schedule</i>
Exar	mples: Boats, trailers, motors No Yes Make Model:	· ·	er recreational vehicles, other t, fishing vessels, snowmobiles, Who has an interest in the one.	motorcycle accessori	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule ims Secured by Propertion Current value of the
Exar	mples: Boats, trailers, motors No Yes Make Model: Year:	· ·	who has an interest in the one. Debtor 1 only	motorcycle accessori property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on <i>Schedule</i>
Exar	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only At least one of the debtor	motorcycle accessori property? Check nly rs and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert Current value of the
Exar	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 ond	motorcycle accessori property? Check nly rs and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert Current value of the
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions) Who has an interest in the one.	property? Check nly rs and another nity property (see	Do not deduct secured the amount of any secu Creditors Who Have Claterent value of the entire property?	red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. F
4.1	Make Model: Other information: Make Model: Make Model: Make Model: Model: Model: Model: Model: Model:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions) Who has an interest in the one.	property? Check nly rs and another nity property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu	claims or Schedule of the portion you own?
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions) Who has an interest in the one. Debtor 1 and Debtor 2 or At least one of the debtor instructions)	property? Check nly rs and another nity property (see	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule ims Secured by Propent Current value of the portion you own? claims or exemptions. If the claims on Schedule ims Secured by Propentities.
4.1	Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 on At least one of the debtor Check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check nly rs and another nity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or schedule portion you own? claims or exemptions. I lired claims on Schedule aims Secured by Propertion you own?
4.1	Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information:	· ·	who has an interest in the one. Debtor 1 and Debtor 2 or At least one of the debtor instructions) Who has an interest in the one. Debtor 1 and Debtor 2 or At least one of the debtor instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only	property? Check nly rs and another nity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. F
4.1	Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:	· ·	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 on At least one of the debtor Check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check nly rs and another nity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	claims or schedule portion you own? claims or exemptions. I lired claims on Schedule aims Secured by Propertion you own?

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 13 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... used furniture \$650.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... used electronics (TV, Computer, Fax, Cell phone) \$850.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... used clothing \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1800.00 for Part 3. Write that number here

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 14 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$600.00 17.1. Checking account: Citibank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 15 of 68

Deb	tor 1 Michael First Name	Middle Name	I hompson	Case number (if known)	
20.	Government and corp	orate bonds and other negotial include personal checks, cashiers			
	Non-negotiable instrum	ents are those you cannot transfe	r to someone by signing or	delivering them.	
	No Yes. Give specific information about them	Issuer name:			
		-			<u> </u>
21.	Retirement or pension		thrift equipme accounts o	r other pension or profit-sharing plans	
	No	in, Lilion, Reogli, 401(k), 403(b)	i, tillit savings accounts, o	Tottler pension of profit-straining plans	
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:	401k		\$1800.00
	separately.	Pension plan:	-		_
		IRA:			_
		Retirement account:			
		Keogh:			_
		Additional account:			-
		Additional account:			
22.		prepayments d deposits you have made so that with landlords, prepaid rent, publi			_
	✓ No		Institution name:		
	Yes	Electric:	-		_
		Gas:			_
		Heating oil:			_
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			-
		Rented furniture:			_ '
		Other:			_
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for a	number of years)	
	✓ No	, , ,	•	, ,	
	Yes	Issuer name and description:			
	_				
					-
		-			· ·

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 16 of 68

Debt	or 1 Michael First Name	Middle Nove	Thompson	Case number (if known)	
24.		Middle Name n education IRA, in an account	Last Name in a qualified ABLE program, or under	r a qualified state tuition program.	
		30(b)(1), 529A(b), and 529(b)(1).			
	✓ No Yes	Institution name and description.	Separately file the records of any interests	s.11 U.S.C. § 521(c):	
25.		ble or future interests in proper or your benefit	rty (other than anything listed in line	1), and rights or powers	
	No Yes. Descri	ibe			
26.		=	ets, and other intellectual property acceds from royalties and licensing agree	ments	
	✓ No				
	Yes. Desc	ibe			
27	Licenses from	chises, and other general intan	nsiblee		
27.			ooperative association holdings, liquor lid	censes, professional licenses	
	✓ No				
	Yes. Desc	ibe			
Mor	ney or proper	ty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or proper				portion you own?
	Tax refunds ov	red to you			portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov No Yes. Give s			Federal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov No Yes. Give s about you a	ved to you pecific information		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov No Yes. Give s about you a and ti	pecific information them, including whether lready filed the returns ne tax years			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov No Yes. Give s about you a and ti	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, d	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, d	State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, d	State: Local: divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, d	State: Local: divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, d	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, d	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past No Yes. Give s	pecific information them, including whether lready filed the returns ne tax years	al support, child support, maintenance, o	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past No Yes. Give s Other amount: Examples: Unpa	pecific information them, including whether lready filed the returns ne tax years	ments, disability benefits, sick pay, vacat	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov ✓ No Yes. Give s about you a and ti Family support Examples: Past ✓ No Yes. Give s Other amount: Examples: Unpport Soci	pecific information them, including whether lready filed the returns ne tax years	ments, disability benefits, sick pay, vacat	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past No Yes. Give s Other amount: Examples: Unp	pecific information them, including whether lready filed the returns ne tax years	ments, disability benefits, sick pay, vacat	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 17 of 68

Deb	tor 1 Michael		Thompson	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance polici Examples: Health, disability, or		th savings account (HSA); credit, he	omeowner's, or renter's insurance	
	No ✓ Yes. Name the insurance	company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its		Lincoln Heritage Life		\$0.00
					_
32.	Any interest in property that If you are the beneficiary of a liproperty because someone has	iving trust, expect p	someone who has died roceeds from a life insurance policy	r, or are currently entitled to receive	
	No				
	Yes. Describe				
33.	Claims against third parties Examples: Accidents, employr		ou have filed a lawsuit or made a rance claims, or rights to sue	a demand for payment	
	✓ No				_
	Yes. Describe				
34.	Other contingent and unlique to set off claims	 uidated claims of e	every nature, including counterc	laims of the debtor and rights	-
	No				
	Yes. Describe				
35.	Any financial assets you did	not already list			
	No				
	Yes. Describe				
36.	Add the dollar value of all o	— f your entries from	ı Part 4, including any entries fo	r pages you have attached	***************************************
		-	, , ,		\$2400.00
Part	5: Describe Any Busine	ss-Related Prop	perty You Own or Have an In	terest In. List any real estate in Pa	art 1.
37.	Do you own or have any leg	al or equitable into	erest in any business-related pro	pperty?	
	✓ No. Go to Part 6.				Current value of the portion you own?
	Yes. Go to line 38.				Do not deduct secured claims or exemptions
38.	Accounts receivable or com	nmissions you alre	ady earned		
	✓ No				7
	Yes. Describe				
39.	Office equipment, furnishing	 gs, and supplies			
	Examples: Business-related co		modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, el	ectronic devices
	✓ No Yes. Describe				1

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 18 of 68

Deb	tor 1 Michael	Thompson	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, equip	pment, supplies you use in business, and tools of your trade		
	✓ No			
	Yes. Describe			
				
41.	Inventory			
	✓ No			
	Yes. Describe			
				
42.	Interests in partnerships	or joint ventures		
	✓ No			
	Yes. Give specific	Name of entity:	% of ownership:	
	information about			
	them			
43.	Customer lists, mailing list	s, or other compilations		
	√ No			
		de personally identifiable information (as defined in 11 U.S.C. § 1	101(41A))?	
	☐ No			
	Yes. Describe.			
4.4	A b			
44.	Any business-related pro	perty you did not already list		
	✓ No			
	Yes. Give specific			<u> </u>
	information			_
				<u> </u>
		-		
				<u> </u>
45. A	dd the dollar value of all o	f your entries from Part 5, including any entries for pages yo	ou have attached	
		ere		
<u> </u>	D			
Part	If you own or have an inte	n- and Commercial Fishing-Related Property You Overest in farmland, list it in Part 1.	wn or have an interest in.	
46.	Do you own or have any l	egal or equitable interest in any farm- or commercial fishin	g-related property?	
	No. Go to Part 7.			Current value of the
	Yes. Go to line 47.			portion you own?
	Tes. do to line 47.			Do not deduct secured claims or exemptions
47.	Farm animals			P
	Examples: Livestock, poult	ry, farm-raised fish		
	√ No			
	Yes. Describe			

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 19 of 68

Debt		hompson	Case number (if known)	
		ast Name		
48.	Crops-either growing or harvested			
	✓ No			
	Yes. Describe			
	-			
49.	Farm and fishing equipment, implements, machinery, fixture	es, and tools of trade		
	✓ No			
	Yes. Describe			
50.	Farm and fishing supplies, chemicals, and feed			
	✓ No			
	Yes. Describe			
51	Any farm- and commercial fishing-related property you did it	not alroady list		
51.	—	not aneady list		
	✓ No			
	Yes. Describe			
				1
	dd the dollar value of all of your entries from Part 6, including			
tor Pa ▶	art 6. Write that number here			
Part	7: Describe All Property You Own or Have an Intere	set in That You Did N	ot List Above	
			ot List Above	
55.	Do you have other property of any kind you did not already li Examples: Season tickets, country club membership	151:		
	✓ No			
	Yes. Give specific			
	information			
54. A	dd the dollar value of all of your entries from Part 7. Write tha	at number here		
Part	8: List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2		>	
56. r	part 2 total vehicles, line 5	\$2800.00		
57. P	Part 3: Total personal and household items, line 15	\$1800.00		
50 D	Part 4: Total financial assets, line 36	ψ1000.00		
30.F	art 4. Total illianicial assets, line 30	\$2400.00		
59. F	Part 5: Total business-related property, line 45			
60. F	Part 6: Total farm- and fishing-related property, line 52			
61 [Part 7: Total other property not listed, line 54			
62. 1	Total personal property. Add lines 56 through 61	\$7000.00	_	+ \$7000.00
			Copy personal property total	
				\$7000.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 20 of 68

Fill in this information to identify your case:				
Debtor 1	Michael		Thompson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Glate)	

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	Identity the Property You Clair	n as Exempt			
1.					
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)		
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption	
	Brief description: Saab 9-3, 2005, 2005 Saab 9-3 Line from Schedule A/B: 03	\$2,800.00	\$2,400.00; \$400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)	
	Brief			735 ILCS 5/12-1001(a)	
	description:	\$300.00	7		
	used clothing		\$300.00	_	
	Line from Schedule A/B: 11		100% of fair market value, up to any applicable statutory limit		
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case?		

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 21 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$850.00 description: V \$850.00 used electronics (TV, 100% of fair market value, up to any Computer, Fax, Cell applicable statutory limit phone) Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) \$650.00 description: **✓** used furniture 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief description: \$600.00 **✓** \$600.00 Checking account, 100% of fair market value, up to any Citibank applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1006 description: \$1,800.00 **✓** \$1,800.00 401(k) or similar plan, 100% of fair market value, up to any 401k applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(f) \$0.00 description: **✓** \$0

100% of fair market value, up to any

applicable statutory limit

Lincoln Heritage Life

31

Line from

Schedule A/B:

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 22 of 68

Fill in this inf	formation to identify your ca	ase:				
Debtor 1	Michael		Thompson			
	First Name	Middle Name	Last Name	-		
Debtor 2						
(Spouse, if filing	First Name	Middle Name	Last Name	-		
United States	s Bankruptcy Court for the:	Northern	District of Illinois	_		
			(State)			
Case numbe (If known)	<u> </u>			-		
Officia	l Form 106D					Check if this is an amended filing
Sched	lule D: Credit	ors Who Ha	ve Claims Secu	red by Prop	erty	12/15
more space			e are filing together, both are on the entries, and attach it			
1. Do any	y creditors have claims s	ecured by your proper	ty?			
✓ No	o. Check this box and subr	mit this form to the court	with your other schedules. You	have nothing else to repo	ort on this form.	
Ye	s. Fill in all of the information	n below.				
Part 1: Lis	st All Secured Claims					
for each		ditor has a particular claim,	red claim, list the creditor separate list the other creditors in Part 2. A g to the creditor's name.		Column B Value of collateral that supports	Column C Unsecured portion If any

this claim

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 23 of 68

еч .		and the state of the state of						
HIIII	in this intori	mation to identify your c	ase:					
Deb	otor 1	Michael		Thompson				
		First Name	Middle Name	Last Name				
	otor 2							
(Spo	use, if filing)	First Name	Middle Name	Last Name				
Unit	ted States B	ankruptcy Court for the:	Northern	District of Illinois				
Coo	e number			(State)				
(If kno		-						
Off	ficial F	orm 106E/F				Che	ck if this is an	amended filing
			ditara Mha	Have Hee	agurad Claima			
5 0	neau	ile E/F: Gre	editors who	nave uns	ecured Claims			12/15
othe Form clain the e knov	r party to a n 106A/B) a ns that are entries in t vn).	any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D: C</i> he boxes on the left. At	s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims	t could result in a cla expired Leases (Offic s Secured by Propert	aims and Part 2 for creditors wit im. Also list executory contracts ial Form 106G). Do not include a y. If more space is needed, copy he top of any additional pages, v	s on <i>Schedu</i> ny creditor the Part yo	<i>ile A/B: Prop</i> s with partia ou need, fill i	perty (Official ally secured t out, number
1.		reditors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, ider As much a Continuat	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	is. If a claim has both priorit	ty and nonpriority amo ding to the creditor's n particular claim, list the		both priority	and nonprio	rity amounts.
						Total	Priority	Nonpriority

claim

amount

amount

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 24 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 ATG CREDIT \$570.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6/2016 1700 W CORTLAND ST STE 2 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO Illinois 60622 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes CAP1/L&T 4.2 \$76.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2016 PO Box 85520 Number Street As of the date you file, the claim is: Check all that apply. Contingent 23285 Richmond Virginia Unliquidated City Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes CAPITAL ONE 4.3 \$706.00 Last 4 digits of account number 0371 Nonpriority Creditor's Name When was the debt incurred? P O Box 30253 7/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 84130 Salt Lake City Utah Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? No Yes

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 25 of 68

 Debtor 1 First Name
 Middle Name
 Thompson
 Case number (if known)

 Last Name
 Last Name

	After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
4	CAPITALONE	—— Last 4 digits of account number	\$748.00
	Nonpriority Creditor's Name PO BOX 26625	When was the debt incurred? 7/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	RICHMOND Virginia 23261	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans Obligations griding out of a congretion agreement or	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No Yes		
.5	CITIFINANCIA	Last 4 digits of account number 8076	\$5,946.00
	Nonpriority Creditor's Name 605 MUNN ROAD C/S CARE DEPT	When was the debt incurred? 5/2009	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	FORT MILL South Carolina 29715	— Unliquidated	
	City State Zip Code		
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only	불	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify 60 InstallmentLoan	
	✓ No		
	Yes		
6	Commonwealth Edison	Last 4 digits of account number	\$122.71
	Nonpriority Creditor's Name 3 Lincoln Ctr Fl 4	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
		H '	
	Oakbrook Ter Illinois 60181	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify unsecured	
	Is the claim subject to offset?		

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 26 of 68

 Debtor 1 First Name
 Middle Name
 Thompson
 Case number (if known)

 Last Name
 Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
4.7	CRDT FIRST Nonpriority Creditor's Name POB 81315 Number Street	Last 4 digits of account number 2859 When was the debt incurred? 10/2016 As of the date you file, the claim is: Check all that apply.	\$841.00
	CLEVELAND Ohio 44181 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	
4.8	CREDIT FIRST N A Nonpriority Creditor's Name 6275 EASTLAND RD Number Street BROOK PARK Ohio 44142 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes	Last 4 digits of account number When was the debt incurred? 10/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	\$911.00
4.9	CREDITONEBNK Nonpriority Creditor's Name PO BOX 98872 Number Street LAS VEGAS Nevada 89193 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Hen was the debt incurred? 7/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard	\$940.00

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 27 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** HEAVNER BEYERS MIHLAR LLC 4.10 \$1.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 111 E Main St # 200 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 62523 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify judgment 09M1176638 Is the claim subject to offset? **✓** No Yes 4.11 Navient \$68,278.00 1025 Last 4 digits of account number ___ Nonpriority Creditor's Name 2/2002 PO BOX 9500 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes Peoples Gas Light & Coke Co. 4.12 \$120.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph St. When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ unsecured Is the claim subject to offset?

✓ No Yes

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 28 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Resurgence Legal Group \$9,300.00 Last 4 digits of account number Nonpriority Creditor's Name 1161 LAKE COOK RD #E When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60015 Deerfield Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Judgment 13M1142034 Is the claim subject to offset? **✓** No Yes 4.14 Steven J. Fink \$1.00 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 25 E. Washington # Suite 1233 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60602 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify judgment 14M1139009 Is the claim subject to offset? **✓** No

Yes

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 29 of 68

Debtor 1 Michael Thompson Case number (if known)

First Na	me Middle Name Last Name		<u> </u>
Part 4: Add t	ne Amounts for Each Type of Unsecured Claim		
6. Total the a	nmounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	
			Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claims
Total claims from Part 2	6f. Student loans	6f.	\$68,278.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$20,282.71
	6i Total Add lines 6f through 6i	6i	\$88,560.71

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 30 of 68

Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Michael		Thompson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States E	Sankruptcy Court for the:	Northern	District of Illinois	
Case number (If known)			(State)	

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 31 of 68

		D(ocument rag	gc 31 01 00	
Fill in this	information to identify your	case:			
Debtor 1	Michael		Thompson		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois		
Case num	nber		(State)		
Offici	al Form 106H				if this is an ded filing
Sched	dule H: Your Co	debtors			12/15
1. Do ye	nswer every question. ou have any codebtors? (If y No Yes	rou are filing a joint case, do	not list either spouse as	as a codebtor.)	
	in the last 8 years, have you by Louisiana, Nevada, New Me No. Go to line 3. Yes. Did your spouse, form	exico, Puerto Rico, Texas, W	ashington, and Wisconsi		alifornia,
	Yes. In which commun	ity state or territory did yo	u live?	Fill in the name and current address of that person.	
	Name of your spouse,	former spouse, or legal equ	ivalent		
	Number Street				
	City	State	Zip Co	Code	
	•	•	•	or if your spouse is filing with you. List the person shown in l	

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 32 of 68

				. ago 0 2			
Fill in this i	nformation to identify	your case:					
Debtor 1	Michael		Thomp	oson			
	First Name	Middle Name	Last N	ame	_ Che	eck if this is:	
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last N	ame	-	An amended filing	
	es Bankruptcy Court for	Northern Northern	_ District of Illi	nois		A supplement showing post-petitic expenses as of the following date:	
Case number	er		(5	State)			
(If known)						MM / DD / YYYY	
Official	Form 106I						
Sched	ule I: Your In	come					12/15
spouse. If n number (if l	•	l, attach a separate she y question.	•	•	•	not include information about ional pages, write your name	•
1. Fill in yo	our employment		Debtor 1			Debtor 2	
		Employment status	✓ Emplo	yed		Employed	
attach a	ave more than one job, separate page with ion about additional	0	Not Er	mployed		Not Employed	
	part time, seasonal, or	Occupation					
	part time, seasonal, or bloyed work.	Employer's name	Z Gallerie I	LLC		_	
	tion may include student emaker, if it applies.	Employer's address	1855 W 13 Number Str			Number Street	
			Gardena	California	90249	_	
			City	State	Zip Code	City State Zi	ip Code
		How long employed there?					
Part 2: G	ive Details About N	Monthly Income					
spouse unl	less you are separated.	e more than one employer,	•	information for a	•	write \$0 in the space. Include your or that person on the lines below. If For Debtor 2 or non-filing spouse	
		ary, and commissions (befo , calculate what the monthly		2.	\$2,182.79		
3. Estim	ate and list monthly over	rtime pay.		3	+ \$0.00		
4. Calcu	late gross income. Add li	ine 2 + line 3.		4.	\$2,182.79		

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 33 of 68

Debtor 1Michael First Name Middle Name	Thompson Last Name	Case number (known)	<u> </u>	
. not have	2001 100110	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$2,182.79		
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$392.97		
5b. Mandatory contributions for retirement plans	5b.	\$0.00		
5c. Voluntary contributions for retirement plans	5c.	\$0.00		
5d. Required repayments of retirement fund loans	5d.	\$0.00		
5e. Insurance	5e.	\$0.00		
5f. Domestic support obligations	5f.	\$0.00		
5g. Union dues	5g	\$0.00		
5h. Other deductions. Specify: Healthcare	5h. +	\$229.19 +		
6. Add the payroll deductions. Add lines $5a+5b+5c+5d+5h$.	5e +5f + 5g 6.	\$622.16		
7. Calculate total monthly take-home pay. Subtract line 6 fro	om line 4. 7.	\$1,560.63		
8. List all other income regularly received:				
8a. Net income from rental property and from operating business, profession, or farm				
Attach a statement for each property and business showi gross receipts, ordinary and necessary business expense the total monthly net income.		\$0.00		
8b. Interest and dividends	8b.	\$0.00		
8c. Family support payments that you, a non-filing spous dependent regularly receive	se, or a			
Include alimony, spousal support, child support, mainter divorce settlement, and property settlement.	nance, 8c.	\$0.00		
8d. Unemployment compensation	8d.	\$0.00		
8e. Social Security	8e.	\$0.00		
8f. Other government assistance that you regularly rece Include cash assistance and the value (if known) of any n cash assistance that you receive, such as food stamps (bunder the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	on-	\$0.00		
8g. Pension or retirement income	8g.	\$0.00		
8h. Other monthly income. Specify:	8h. +	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f	+8g + 8h. 9.	\$0.00		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-fi	10. Iing spouse	\$1,560.63 +	=	\$1,560.63
11. State all other regular contributions to the expenses th Include contributions from an unmarried partner, members o friends or relatives. Do not include any amounts already included in lines 2-10 or	f your household, your d	ependents, your roomma		
Specify:			11. +	\$0.00
12. Add the amount in the last column of line 10 to the amount on the Summary of Schedules and Statistic				\$1,560.63 Combined
13. Do you expect an increase or decrease within the year No.	after you file this form?			monthly income
Yes. Explain:				

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 34 of 68

		Doci	ument Page 34 of 6	3		
Fill in this infor	mation to identify your	case:				
Debtor 1	Michael		Thompson			
Dahta : 0	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	J	
United States E	ankruptcy Court for the	e: Northern	District of Illinois (State)	A supplement sho expenses as of th		petition chapter 13 date:
Case number (If known)			(2.2)	MM / DD / YYYY		
Official	Form 106J			, 55, 1111		
Schedul	e J: Your Ex	penses				12/15
information. If (if known). Ans	-	d, attach another sheet to this	re filing together, both are equal s form. On the top of any addition			
1. Is this a joi		<u>oid</u>				
	to line 2					
		separate household?				
	7 No	ooparate noucement				
L	_	file Official Forms 106 L2 Evac	nses for Separate Household of Deb	tor 2		
2 Do you hav			nises for Separate Household of Deb			
Do not list D	e dependents?	Yes. Fill out this information for	B d H l. P l. P l.	Barratanta	D.	
Debtor 2.		each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	with you?	endent live
	enses include f people other	No				
than yourself and		Yes				
dependents	-					
Part 2: Estin	mate Your Ongoing	g Monthly Expenses				
_	of a date after the ban		you are using this form as a supp pplemental Schedule J, check the	-	•	
	•	-cash government assistance lit on <i>Schedule I: Your Incom</i> e	-			Your expenses
	or home ownership or the ground or lot. 4.	expenses for your residence.	nclude first mortgage payments and		4.	\$400.00
If not incl	uded in line 4:					
4a. Real es	state taxes				4a	\$0.00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 35 of 68

 Debtor 1 First Name
 Middle Name
 Thompson
 Case number (if known)

 Last Name

6. Utilities: 6.a. Ectoricity, heat, natural gas 6.a. 5.0.0 6.b. Water, sewer, garbage collection 6.b. 5.0.0 6.c. Telephone, cell phone, Internet, satellife, and cable services 6.c. \$130.0 6.d. Other, Specify: 6.d. \$1.00 7. Food and housekeeping supplies 7. \$307.0 8. Childcare and children's education costs 8. \$0.0 9. Clothing, laundry, and dry cleaning 9. \$95.0 10. Personal care products and services 10. \$85.0 11. Medical and dental expenses 11. \$100.0 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$330.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.0 14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. \$1.5 \$0.0 15. Life insurance \$1.5 \$0.0 15. Cychicle insurance deducted from your pay or included in lines 4 or 20. \$1.5 \$0.0 15. Cychicle insurance \$1.5 \$0.0 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 17. Installment or lease payments \$0.0 \$0.0 17. Loster specify: \$0.0 \$0.0 17. Loster specify: \$0.0 \$0.0 17. Loster specify: \$0.0 \$0.0 18. Your payments for Vehicle 2 \$0.0 \$0.0 19. Cour payments for Vehicle 2 \$0.0 \$0.0 19. Cour payments for Vehicle 1 \$0.0 \$0.0 19. Cour payments of mines, Specify: \$0.0 \$0.0 19. Cour payments for Vehicle 2 \$0.0 \$0.0 19. Cour payments of mines, specify: \$0.0 \$0.0 19. Cour payments of mines, specify: \$0.0 \$0.0 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income \$0.0 \$0.0 20. Cherperty, homeowner's, or renter's insurance \$0.0 \$0.0 20. Cherperty, homeowne	First Name	Middle Name L	ast Name		
6. Utilities: 6.a. Ectricity, heat, natural gas 6.b. Metar, sower, garbage collection 6.b. Metar, sower, garbage collection 6.b. Metar, sower, garbage collection 6.c. Telephone, cell phone, Internet, satellite, and cable services 6.c. 1930.0 6.c. Telephone, cell phone, Internet, satellite, and cable services 6.c. 3930.0 6.c. Other. Specify: 7. Food and housekeeping supplies 8. \$0.0 8. \$0.0 9. Clothing, laundry, and dry cleaning 9. \$950.0 9. Clothing, laundry, and dry cleaning 9. \$950.0 10. Personal care products and services 10. \$885.0 11. Medical and dental expenses 11. \$100.0 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$330.0 13. Charlation include gas, maintenance, bus or train fare. 14. \$0.0 15. Insurance. 15. Charlation insurance deducted from your pay or included in lines 4 or 20. 15. Life insurance. 15. Charlation insurance deducted from your pay or included in lines 4 or 20. 15. Charlation insurance. Specify: 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Carpayments for Vehicle 1 17. Carpayments for Vehicle 1 17. Carpayments for Vehicle 1 17. Carpayments for Vehicle 2 17. Carpayments for Vehicle 2 17. Carpayments for Vehicle 2 17. Carpayments for Vehicle 1 17. Carpayments for Vehicle 1 18. Your payments of the vehicle 2 19. \$0.0 19. \$0.0 19. \$0.0 19. \$0.0 19. \$0.0 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.0 20b. Real estate taxes. 20b. \$0.0 20c. Property, homeowner's, or renter's insurance 20c. \$0.0 20c. Property, homeowner's, or renter's insurance 20c. \$0.0 20c. Property, homeowner's, or renter's insurance 20c. \$0.0 20c. \$0.0 20c. Medical payer, and upkase expenses.					Your expenses
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, and cable services 6c. Telephone, cell phone, internet, satellite, satellite, satellite, satellite, satellite, satell	5. Additional mortgage payment	s for your residence, such as hom	ne equity loans	5.	\$0.00
6b. Water, sewer, garbage collection 6b. \$0.0 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$13.00 6d. Other. Specify: 7c. \$307.00 7. Food and housekeeping supplies 7c. \$307.00 8. Childcare and children's education costs 8c. \$0.00 9. Clothing, laundry, and dry cleaning 9c. \$85.00 10. Personal care products and services 11c. \$100.00 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$330.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 15a. Life insurance 15a \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance 15c \$12.0 15c. Vehicle insurance \$15a \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00	6. Utilities:				
6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$130.0 6d. Other, Specify; 6d. \$0.0 7. Food and housekeeping supplies 7. \$327.0 8. Childcare and children's education costs 8. \$0.0 9. Clothing, laundry, and dry cleaning 9. \$95.0 10. Personal care products and services 10. \$85.0 11. Medical and dental expenses 11. \$100.0 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$330.0 Do not include carp payments 13. \$0.0 14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. 15a. \$0.0 15. Life insurance deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 15c. Vehicle insurance Specify: 15a \$0.0 1	6a. Electricity, heat, natural gas			6a.	\$0.00
6d. Other. Specify: 7. Food and housekeeping supplies 7. S307.0 8. Childrare and children's education costs 8. S0.0 9. Clothing, laundry, and dry cleaning 9. S85.0 10. Personal care products and services 10. S85.0 11. Medical and dental expenses 11. S100.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include gas, maintenance, bus or train fare. Do not include gas, maintenance, bus or train fare. Do not include gar, payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15s. Life insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 17c. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other	6b. Water, sewer, garbage colle	ction		6b.	\$0.00
7. Food and housekeeping supplies 7. \$307.0 8. Childcare and childcare's education costs 8. \$0.0 9. Clothing, laundry, and dry cleaning 9. \$95.0 10. Personal care products and services 10. \$85.0 11. Medical and dental expenses 11. \$100.0 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$330.0 13. Entertailment, clubs, recreation, newspapers, magazines, and books 13. \$0.0 14. Charitable contributions and religious donations 13. \$0.0 15. Insurance. 15a \$0.0 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a \$0.0 15b. Health insurance 15a \$0.0 15c. Vehicle insurance 15c \$123.0 15c. Vehicle insurance. 15c \$123.0 15c. Vehicle insurance. Specify: 15c \$0.0 15c. Vehicle insurance. Specify: 16 \$0.0 <t< td=""><td>6c. Telephone, cell phone, Inte</td><td>net, satellite, and cable services</td><td></td><td>6c.</td><td>\$130.00</td></t<>	6c. Telephone, cell phone, Inte	net, satellite, and cable services		6c.	\$130.00
8. Childcare and children's education costs 8. \$0.0 9. Clothing, laundry, and dry cleaning 9. \$95.0 10. Personal care products and services 10. \$85.0 11. Medical and dental expenses 11. \$100.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$0.0 14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.0 15b. Health insurance 15c \$1.0 \$0.0 15c. Vehicle insurance. 15c \$1.0 \$0.0 15c. Vehicle insurance. 15c \$1.0 \$0.0 15c. Vehicle insurance. 15c \$1.2 \$0.0 15c. Vehicle insurance. 15c \$1.2 \$0.0 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 \$pecify: 17a. Car payments for Vehicle 1 17a. \$0.0 17c. Other. Specify: 17b. \$0.0 17c. Oth	6d. Other. Specify:			6d	\$0.00
9. Clothing, laundry, and dry cleaning 9. \$85.0 10. Personal care products and services 10. \$85.0 11. Medical and dental expenses 11. \$100.0 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$330.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.0 14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. 15. \$0.0 15c. Insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.0 15c. Vehicle insurance 15b. \$0.0 \$0.0 \$0.0 \$0.0 \$0.0 15c. Vehicle insurance. Specify: 15d. \$0.0 \$0	7. Food and housekeeping supp	ies		7.	\$307.00
10. Personal care products and services 10. \$88.0 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$330.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.0 14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.0 15b. Health insurance 15a \$0.0 15c. Vehicle insurance Specify: 15d \$0.0 15c. Vehicle insurance. Specify: 15d \$0.0 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 17c. Installment or lease payments: 17a \$0.0 \$0.0 17c. Car payments for Vehicle 1 17a \$0.0 \$0.0 17c. Other. Specify: 17c \$0.0 \$0.0 18. Your payments of allimony, main	8. Childcare and children's educ	eation costs		8.	\$0.00
11. Medical and dental expenses 11. \$100.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$330.0 12. Intertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.0 14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. 0 \$0.0 Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.0 15a. Life insurance 15b. \$0.0 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance \$0.0 15c. Vehicle insurance. Specify: 15d. \$0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$pecify: 16 \$0.0 17. Installment or lease payments: 17a. \$0.0 17a. Car payments for Vehicle 1 17a. \$0.0 17b. Car payments for Vehicle 2 17b. \$0.0 17c. Other. Specify: 17c. \$0.0 17c. Other. Specify: 17c. \$0.0 18. Your payments for Vehicle 1, Your Income (Official Form 106). 18. 19. \$0.0 19. Other	9. Clothing, laundry, and dry cle	aning		9.	\$95.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20a. Mortgages on other property 20a. Mortgages on ther property 20a. Mortgages on ther property 20a. Mortgages on ther property 20b. Real estate taxes. 20b. \$0.00 20d. Maintenance, repair, and upkeep expenses.	10. Personal care products and	services		10.	\$85.00
Do not include car payments 13.	11. Medical and dental expense	s		11.	\$100.00
14. Charitable contributions and religious donations 14. \$0.0 15. Insurance. 15. Insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.0 15b. Health insurance 15b \$0.0 \$0.0 \$0.0 15c. Vehicle insurance 15c \$123.0 \$0.0 \$0.0 15d. Other insurance. Specify: 15d \$0.0 \$0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 Specify: 16 \$0.0 \$0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 \$0.0 17. Installment or lease payments: 17e \$0.0 \$0.0 17a. Car payments for Vehicle 2 17b \$0.0 \$0.0 17b. Car payments for Vehicle 2 17c \$0.0 \$0.0 17c. Other. Specify: 17c \$0.0 \$0.0 17c. Other. Specify: 17c \$0.0 \$0.0 18. Your payments of alimony, maintenance, and support that	-	maintenance, bus or train fare.		12.	\$330.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other Specify: 15	13. Entertainment, clubs, recrea	tion, newspapers, magazines, ar	nd books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments or Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses.	14. Charitable contributions and	l religious donations		14.	\$0.00
15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$123.0 15d. Other insurance. Specify: 15d \$0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.0 Specify: 16 \$0.0 17. Installment or lease payments: 16 \$0.0 17. Locar payments for Vehicle 1 17a \$0.0 17b. Car payments for Vehicle 2 17b \$0.0 17c. Other. Specify: 17c \$0.0 17d. Other. Specify: 17d \$0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.0 \$0.0 Specify: 19. \$0.0 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a \$0.0 20b. Real estate taxes. 20b \$0.0 20c. Property, homeowner's, or renter's insurance 20c \$0.0 20c. Property, homeowner's, or renter's insurance 20d \$0.0		cted from your pay or included in lin	es 4 or 20.		
15c. Vehicle insurance 15c \$123.0 15d. Other insurance. Specify:	15a. Life insurance			15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance			15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	15c. Vehicle insurance			15c	\$123.00
Specify:	15d. Other insurance. Specify:			15d	\$0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$0.0 17b. Car payments for Vehicle 2 17b. \$0.0 17c. Other. Specify: 17c. \$0.0 17d. Other. Specify: 17d. \$0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.0 Specify: 19. \$0.0 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.0 20b. Real estate taxes. 20b. \$0.0 20c. Property, homeowner's, or renter's insurance 20c. \$0.0 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.0	16. Taxes. Do not include taxes de	educted from your pay or included in	n lines 4 or 20.		
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.0 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.	Specify:			16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. So.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.0 20b. Real estate taxes. 20b \$0.0 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.0	17. Installment or lease paymen	ts:		10	
17c. Other. Specify:	17a. Car payments for Vehicle			17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle	2		17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:			17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 19.Other payments you make to support others who do not live with you. Specify: 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.0 20b. Real estate taxes. 20c \$0.0 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.0				17d	\$0.00
19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.0 20b. Real estate taxes. 20b \$0.0 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.0			-		\$0.00
Specify:		•		18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.0		support others who do not live v	vith you.	40	**
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.0 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.0		not included in lines 4 or 5 of th	is form or an Schodula II Vaur Income	19.	\$0.00
20b. Real estate taxes. 20b \$0.0 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.0			no form of on Schedule I. Your Income.	202	ቁስ ስስ
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.0		·· ·			
20d. Maintenance, repair, and upkeep expenses. 20d \$0.0		r renter's insurance			
	• •				
ZUE HOMEOWNER'S ASSOCIATION OF CONDOMINIUM QUES	20e. Homeowner's association			20d	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 36 of 68

Debtor 1				Thompson	Case number (if known)		
	First Na	ame	Middle Name	Last Name			
21. Othe	r. Spec	ify:				21	\$0.00
22. Calc	ulate v	our monthly expense	s.				
22a.	۔ Add line	es 4 through 21.					\$1,570.00
		· ·	es for Debtor 2), if any,	from Official Form 106J-2			\$0.00 \$1,570.00
		` .	ult is your monthly expe			22.	\$1,370.00
23.Calcu	ılate y	our monthly net incon	ne.				
23a.	Copy lii	ne 12 (your combined r	monthly income) from S	chedule I.		23a	\$1,560.63
23b.	Сору у	our monthly expenses	from line 22 above.			23b	\$1,570.00
		, , ,	es from your monthly in	come.			(\$9.37)
	The res	sult is your monthly net	income.			23c	
For more	exampl	e, do you expect to finis	sh paying for your car lo	es within the year after you can within the year or do you codification to the terms of you	expect your		

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 37 of 68

Fill in this information to identify your case:								
Debtor 1	Michael		Thompson					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		Northern	District of Illinois (State)					
Case number (If known)			(-1.1.3)					

Official Form 106Dec

Check if this is an
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	✓ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
×	/s/ Michael Thompson	×							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 4/28/2017	Date							
	MM/DD/YYYY	MM/DD/YYYY							

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 38 of 68

Fill in this info	rmation to identify your	case:					
Debtor 1	Michael		Thompso	า			
ı	First Name	Middle Na					
Debtor 2 (Spouse, if filing)	First Name	Middle Na	me Last Name				
United States	Bankruptcy Court for the	Northern	District of Illinoi	s			
Case number			(State	e)			
(If known)							Check if this is a
Official	Form 107						amended filing
Stateme	ent of Financia	al Affairs fo	r Individuals I	Filina for l	Bankru	ntcv	12/1
information. number (if kr	If more space is need nown). Answer every o	ed, attach a separ question.	ried people are filing t ate sheet to this form. nd Where You Lived	On the top of a			
	s your current marital s		na where fou liveu	<u> Deloi e</u>			
	arried						
	arried ot married						
2. During	Harland O. and Jane		other than where you liv	0			
		ou lived in the last 3	B years. Do not include w Dates Debtor 1 lived there	here you live nov	v.		Dates Debtor 2 lived there
				Same as D	ebtor 1		Same as Debtor 1
73	21 S. Ridgeland			Ш			
	mber Street		From <u>03/2012</u>	Number Street			From
			To <u>03/2015</u>				To
Ch Cit	icago Illinois y State	Zip Code		City	State	Zip Code	
	,	·		Same as D	ebtor 1	<u>. </u>	Same as Debtor 1
Nu —	mber Street		From	Number Street			From
City	y State	Zip Code		City	State	Zip Code	
and territo ✓ No	<i>ories</i> include Arizona, Cali	fornia, Idaho, Louisia	use or legal equivalent in a, Nevada, New Mexico, odebtors (Official Form 1	Puerto Rico, Texas			Community property states .)

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 39 of 68

Thompson

Debtor 1 Michael Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$8300.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$26000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$15000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 40 of 68

Debtor 1 Michael Thompson __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 41 of 68

or 1	Michael			Th	ompson	Case number	(if known)
	First Name		Middle Name	La	st Name		
nsi com age	ders include your porations of whicl	relatives; and you are a for a busin	any general partner an officer, director, ness you operate a	s; relatives of any person in control	general partners; par , or owner of 20% o	tnerships of which y r more of their voting	who was an insider? You are a general partner; To securities; and any managing To domestic support obligations,
✓	No						
	Yes. List all pay	ments to	an insider.	Dates of	Total amount	Amount you	Reason for this payment
				payment	paid	still owe	neason for this paymont
	Insider's Name				- <u></u>		
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No		aranteed or cosigne at benefited an ins	·	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name				<u> </u>		
	Number Street						
	City	State	Zip Code				

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 42 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 43 of 68

Debt	tor 1 Michael	Thompson	Case number (if known)	
	First Name Middle Name	Last Name		
11.	Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you		ank or financial institution, set off any amo	ounts from your
	✓ No ☐ Yes. Fill in the details.			
		Describe the action the	e creditor took Date action was taken	Amount
	Creditor's Name			· ———
	Number Street			
		Last 4 digits of account r	number: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official?		possession of an assignee for the benefit o	f creditors, a court-
	✓ No ☐ Yes			
Part	List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, did	you give any gifts with a to	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			
	Person to Whom You Gave the Gift			<u> </u>
	Number Street			
	City State Zip Code Person's relationship to you			

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 44 of 68

Debt	or 1	Michael	Thompson	Case number (if known)		
		First Name Middle Name	Last Name			
14.	Wit	hin 2 years before you filed for bankruptcy,	did you give any gifts or contribu	itions with a total value of more	than \$600 to	any charity?
	✓	No				
	П	Yes. Fill in the details for each gift or contrib	oution.			
		Gifts or contributions to charities	Describe what you contr	ibuted Date	vou	/alue
		that total more than \$600			ributed	
		Charity's Name	 -			
		Number Street				
		City State Zip Code				
Dort	6.	List Certain Losses				
ган	Ο.	List Gertain Losses				
15.	Wit	hin 1 year before you filed for bankruptcy o	r since you filed for bankruptcy	lid you lose anything because of	theft fire otl	ner disaster or
		nbling?	· ccc youou .o. zuup.ccy,	, o	,,	
		No				
	\blacksquare					
		Yes. Fill in the details.				
		Describe the property you lost and how the loss occurred	Describe any insurance of Include the amount that in		-	/alue of property ost
		now the loss occurred	pending insurance claims			osi
			A/B: Property.			
Part	7:	List Certain Payments or Transfers				
		ut seeking bankruptcy or preparing a bank ude any attorneys, bankruptcy petition preparer No		services required in your bankrupto	у.	
	lacksquare	Yes. Fill in the details.				
			Description and value of transferred	or tr	payment ansfer made	Amount of payment
		Semrad Law Firm	Applied to Costs - 335.00		/2017	\$335.00
		Person Who Was Paid	Applied to Costs - 333.00	47201	2017	φοσο.σσ
		20 S. Clark Street				
		Number Street				
		28th Floor				
		Chicago Illinois 60603				
		ChicagoIllinois60603CityStateZip Code				
		City State Zip Code	_			
		City State Zip Code Email or website address	_			
		City State Zip Code Email or website address None	_			
		City State Zip Code Email or website address	_			
		City State Zip Code Email or website address None	_			
		City State Zip Code Email or website address None Person Who Made the Payment, if Not You				
		City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid				
		City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid				
		City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid				
		City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code				
		City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street				

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 45 of 68

Debtor	1 Michael		Thompson	Case number (if known)	
	First Name Middl	e Name	Last Name			
h	fithin 1 year before you filed for bankrelp you deal with your creditors or to o not include any payment or transfer the	make paym	ents to your creditors?	our behalf pay or transfei	any property to a	nyone who promised to
V	No Yes. Fill in the details.					
L	Tes. I ill ill the details.				_	
			Description and value of a transferred	any property	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					
	City State 7	n Codo				
	City State Zi	p Code				
ar	nd transfers that you have already listed on the No Yes. Fill in the details.	on this statem	Description and value of a	Describe an	y property or	Date
			property transferred		eceived or debts pa	
	Person Who Received Transfer					
	Number Street					
	City State Zip Person's relationship to you	p Code				
	Person Who Received Transfer					
	Number Street					
	City State Zi Person's relationship to you	p Code				
be (T	fithin 10 years before you filed for baneneficiary? These are often called asset-protection de		you transfer any property to	a self-settled trust or sim	nilar device of whic	ch you are a
Ľ						
L	Yes. Fill in the details.		Description and value of	the property transferred		Date transfer was
	Nome of twist					made
	Name of trust					

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 46 of 68

Debtor 1 Michael Thompson Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Extra Space Storage No Name of Storage Facility Name 2376 Fairburn Road Number Street Number Street City State Zip Code 30135 Douglasville Georgia

Zip Code

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 47 of 68

Debtor 1 Michael Thompson _ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 48 of 68

Debto		Michael			Thompson	Case n	number <i>(if F</i>	(nown)		
		First Name		Middle Name	Last Name					
26.	Hav	e you been a part	y in any judio	cial or administr	ative proceeding under	r any environmenta	l law? Inc	lude settlem	nents and orde	rs.
	✓	No Yes. Fill in the det	tails.							
'					Court or agency		Nature o	f the case		Status of the
		Case title								Case
					Court Name					Pending
		Case number			NumberStreet					On appeal
					City State	Zip Code				Concluded
Part ⁻	11:	Give Details Al	oout Your E	Business or Co	onnections to Any Bu	ısiness				
27.	Witl	hin 4 years before	you filed for	bankruptcy, did	l you own a business or	have any of the fol	lowing co	nnections to	any business	?
		A sole propri	etor or self-e	employed in a tra	ade, profession, or othe	r activity, either full-	time or p	art-time		
					LC) or limited liability pa	artnership (LLP)				
		An officer di	-		e of a corporation					
					quity securities of a cor	poration				
	✓	No. None of the a	above applie	s. Go to Part 12.						
		Yes. Check all that	at apply abo	ve and fill in the	details below for each I					
					Describe the nat	ure of the business			lentification n cial Security n	umber Do not umber or ITIN.
		Business Name			_			EIN:		
		Number Street			_			Dates busin	ness existed	
		City	State	Zip Code	Name of account	ant or bookkeeper		_	-	
		Oity	State	Zip Code				From	10	
					Describe the nat	ure of the business			lentification n cial Security n	umber Do not umber or ITIN.
		Business Name			_			EIN:		
		Number Street			_			Dates busin	ness existed	
		City	State	Zip Code	Name of account	ant or bookkeeper		From	To	
		,		_p				110111	10	
					Describe the nat	ure of the business			lentification n cial Security n	umber Do not umber or ITIN.
		Business Name			_			EIN:		
		Number Street			_			Dates busin	ness existed	
		City	State	Zip Code	Name of account	ant or bookkeeper		From	То	
		-		-					~	

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 49 of 68

Deb	otor 1 Michael		Thompson	Case number (if known)
	First Name	Middle Name	Last Name	
28.	creditors, or other parties.	r bankruptcy, did yo	u give a financial stateme	nt to anyone about your business? Include all financial institutions,
	✓ No Yes. Fill in the details below.			
			Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	City State	Zip Code	-	
Pari	t 12: Sign Below			
		nes up to \$250,000,	,	rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debto			Signature of Debtor 2
	Date 4/28/2017			Date
ı	Did you attach additional pages to	Your Statement of	Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
	✓ No Yes			
	── Did you pay or agree to pay somed	ne who is not an at	orney to help you fill out b	pankruptcy forms?
	No No		- · · ·	• •
i	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 50 of 68

Fill in this information to identify your case:									
Debtor 1	Michael		Thompson						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		Northern	District of Illinois (State)						
Case number (If known)			(State)						

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 51 of 68

Debtor	^r Michael		Thompson	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired	d Personal Property Leas	es		
informa	ation below. Do not list		l leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
De	scribe your unexpired p	ersonal property leases		Will the lease be assumed?	
Les	ssor's name:			No Yes	
	scription of leased operty:				
Les	ssor's name:			No Yes	
	scription of leased operty:				
Les	ssor's name:			No Yes	
	scription of leased operty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased operty:				
Les	ssor's name:			No Yes	
	scription of leased operty:				
Les	ssor's name:			No Yes	
	scription of leased operty:			_	
Les	ssor's name:			No Yes	
	scription of leased operty:			_	
Part 3:	Sign Below				
Und			my intention about any	property of my estate that secures a debt and any personal	
×	/s/ Michael Thompson		×		
S	Signature of Debtor 1		Sig	nature of Debtor 2	
С	Date 4/28/2017 MM/DD/YYYY		Da	te MM/DD/YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 56 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Thompson, Michael	Case No	
Debtor(s)		0.000 110.	
		Chapter.	Chapter7
	VERIF	ICATION OF CREDITOR MAT	RIX
Th knowledge	•	ify that the attached list of creditors is tru	ue and correct to the best of their
Date:	4/28/2017	/s/ Thompson, N	1ichael
		Thompson, Mich Signature of Deb	

Navient PO BOX 9500 WILKES BARRE, PA, 18773

CITIFINANCIA 605 MUNN ROAD C/S CARE DEPT FORT MILL, SC, 29715

CREDITONEBNK PO BOX 98872 LAS VEGAS, NV, 89193

CREDIT FIRST N A 6275 EASTLAND RD BROOK PARK, OH, 44142

CRDT FIRST POB 81315 CLEVELAND, OH, 44181

CAPITALONE PO BOX 26625 RICHMOND, VA, 23261

CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

CAP1/L&T PO Box 85520 Richmond, VA, 23285

Resurgence Legal Group 1161 LAKE COOK RD #E Deerfield, IL, 60015

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 58 of 68

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601

HEAVNER BEYERS MIHLAR LLC 111 E Main St # 200 Decatur, IL, 62523

Steven J. Fink 25 E. Washington # Suite 1233 Chicago, IL, 60602 B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

		Nortnern Di	strict of Illinois		
In re	Michael Thompson		Ca	ase No	***************************************
	Debtor		Ch	napter	(If known) Chapter 7
	DISCLOSURE OF C	OMPENSAT	ION OF ATTO	RNEY I	FOR DEBTOR
1.	 Pursuant to 11 U.S.C. § 329(a) and Fec compensation paid to me within one ye rendered or to be rendered on behalf of 	ear before the filing of	the petition in bankruptc	y, or agreed :	to be paid to me, for services
	For legal services, I have agreed to acce	ept			\$1,300.00
	Prior to the filing of this statement I have	ve received			\$0.00
	Balance Due				\$1,300.00
2.	. The source of the compensation paid to	o me was:			
	Debtor	Other (spe	cify)		
3.	. The source of the compensation paid to	o me is:			
	✓ Debtor	Other (spe	cify)		
4.	I have not agreed to share the above members and associates of my law	re-disclosed compens firm.	sation with any other perso	on unless th	ey are
	I have agreed to share the above-di members or associates of my law fi the people sharing in the compensa	rm. A copy of the agr	n with a other person or peement, together with a lis	persons who st of the nam	are not nes of
5.	In return for the above-disclosed fee, I have a Analysis of the debtor's financial bankruptcy;	nave agreed to render al situation, and rende	legal service for all aspect ring advice to the debtor	ts of the ban in determini	kruptcy case, including: ng whether to file a petition in
	b. Preparation and filing of any per	tition, schedules, stat	ements of affairs and plan	which may	be required;
	c. Representation of the debtor at	the meeting of credito	ors and confirmation hear	ing, and any	adjourned hearings thereof;
6.	By agreement with the debtor(s), the ab-	ove-disclosed fee doe	es not include the followin	ng services:	
		CEDT	ELCATION	······································	
			IFICATION		
debt	certify that the foregoing is a complete s or(s) in this bankruptcy proceedings.	statement of any agree	ement or arrangement for	payment to	me for representation of the
····	4/28/2017		/s/ Corey W		
	Date		Signature of A	Attorney	
			Semrad Law	/ Firm	
			Name of lav	v firm	
**				4	

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 60 of 68

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1300.00 in attorney fees plus costs in the amount of \$396.76 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding.

Adding additional bills

Motion to Reopen and Avoid Lien

Motion to Reopen

\$300.00/hr.

\$50.00

\$1000.00

\$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC . Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

MOT

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main
I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Michael Thompson

Date: 04/28/2017

Attornes

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garni

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 62 of 68

			*	
Debtor 1 Michael First Name	Middle Name	Thompson Last Name	Case number (Il known)	
r « 27 ramile	миссие кале	Last Ivarne	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Unemployment compensation Do not enter the amount if you counder the Social Security Act. Inste	ntend that the amount re- ad, list it here:	ceived was a benefit	\$0.00	the state of the s
For your spouse		\$0.00 \$0.00		
9.Pension or retirement income, I benefit under the Social Security A	Do not include any amous st.	nt received that was a	\$0.00	Market and the second
10.Income from all other sources amount. Do not include any benef payments received as a victim of a international or domestic terrorism, page and put the total below.	its received under the Soc war crime, a crime agains	cial Security Act or st humanity, or		
Total amounts from separate page	s, if any.		+\$0.00	+
11. Calculate your total current meach	onthly income. Add line	s 2 through 10 for	\$ <u>1,936.02</u> +	= \$1,936.02
column. Then add the total for C	Column A to the total for C	Column B.	**AATAVISVISIONALA	
Page 25 Determine Whether the	Means Test Annlie	s to Vou		Total current monthly income
	CONTRACTOR OF THE PROPERTY OF			
 Calculate your current monthly Copy your total current month 		Dilow these steps:		e 11 here -> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Multiply by 12 (the number of 12b. The result is your annual inco	, ,	m.		X 12 12b. \$23,232.24
13 Calculate the median family inc	ome that applies to you	. Follow these steps:		
Fill in the state in which you live.		Illinois		
Fill in the number of people in you	household.	, 1		
Fill in the median family income for household.	your state and size of			13. \$50,765.00
To find a list of applicable median i instructions for this form. This list i	ncome amounts, go onlir nay also be available at th	ne using the link specified e bankruptcy clerk's office	in the separate e.	ve jegenster en
14. How do the lines compare?				
14a. Line 12b is less than or e	qual to line 13. On the to	p of page 1, check box 1	. There is no presumption of ab	use.
14b. Line 12b is more than lin Go to Part 3 and fill out F	e 13. On the top of page form 122A-2.	1, check box 2, The pres	umption of abuse is determined	by Form 122A-2.
Part 3: Sign Below				
By signing here, I declare under p	enalty of perjury that the i	nformation on this statem	ent and in any attachments is to	ue and correct.
/s/ Michael Thompson Signature of Debtor 1	·	_ */_	Margar 1	03 hampa
organiare of Depth (N.	griature of Debtor 2	· P~
Date 4/28/2017 MM/DD/YYYY		Di	ate 4/28/2017 MM/DD/YYYY	l
If you checked line 14a, do NO If you checked line 14b, fill out				

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 63 of 68

Debtor 1 Michael First Name	Middle Name	Thompson Last Name	Case number (if kno	wn
Rant Gr Answer These Qu	estions for Reporting Purpose			
^{16.} What kind of debts do you have?	"incurred by an individu No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primari	al primarily for a ly business debt	personal, family, or hous s? Business debts are de rough the operation of the	obts that you incurred to obtain the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	er 7. Do you estima		operty is excluded and administrative red creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,001	-5,000 -10,000 1-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	□ \$10,0 □ \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Part 78 Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	门 \$10,0 门 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	correct. If I have chosen to file under Coof title 11, United States Code under Chapter 7. If no attorney represents me arout this document, I have obtal request relief in accordance will understand making a false state connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, /s/ Michael Thompson Signature of Debtor 1 Executed on 4/28/2017	hapter 7, I am aw the I understand the old I did not pay o ined and read the vith the chapter o atement, conceali- case can result in 1519, and 3571.	rare that I may proceed, if e relief available under ea r agree to pay someone ve notice required by 11 U f title 11, United States C ng property, or obtaining fines up to \$250,000, or	Code, specified in this petition. g money or property by fraud in r imprisonment for up to 20 years, or NOV Debtor 2



Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 64 of 68

Fill in this infor	mation to identify your	case:		
Debtor 1	Michael		Thompson	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	Transferance.
United States E	Bankruptcy Court for the:	Northern	District of Illinois	PARAL STREET,
Case number			(State)	
Li	Form 106De	<u>ec</u>		Check if this is a amended filing
Declarat	ion About an	Individual Deb	tor's Schedules	12/1
If two married	people are filing togeth	er, both are equally respo	nsible for supplying correc	et information.
money or prope	erty by fraud in connec 1341, 1519, and 3571.	nie bankruptcy schedules tion with a bankruptcy ca:	or amended schedules. M se can result in fines up to	aking a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18
Did you p	ay or agree to pay som	eone who is NOT an attor	ney to help you fill out bank	kruptcy forms?
V No Yes	Name of person		Attach Bankruptcy i Signature (Official F	Petition Preparer's Notice, Declaration, and orm 119).
that they	are true and correct.	re that I have read the sur	nmary and schedules filed Signature	with this declaration and Library Shonpy Shonpy Sof Debtor 2
Date 4/28	3/2017		Date	

MM/DD/YYYY

MM/DD/YYYY

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 65 of 68

Debtor 1 №			Thompson	Case number (if known)
Fi	irst Name	Middle Name	Last Name	
credi	n 2 years before y tors, or other part No	ies.	you give a financial staten	nent to anyone about your business? Include all financial institutions,
	res. I iii ii i ii ii ie ee ee	as below.		
			Date issued	
	Name		MM/DO/YYYY	•••
	Number Street		interference and the second se	
	City	State Zip Code		
	O.C.	zip ocac		
	Sign Below			
a bank	x /s/ N	lichael Thompson	o, or imprisonment for up to	o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Date 4/	28/2017		Date
Did you	ı attach additiona	I pages to Your Statement	of Financial Affairs for Indiv	viduals Filing for Bankruptcy (Official Form 107)?
y No				
I Yes	S			
Did you	ι pay or agree to μ	pay someone who is not an a	attorney to help you fill out	t bankruptcy forms?
Z No				
TT Yes	s. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 66 of 68

	or <u>Michael</u>		Thompson	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2	List Your Unexpired	i Personal Property Leas	es	
inform	iation below. Do not list i	pperty lease that you listed in real estate leases. Unexpired property lease if the trustee	leases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2).
De	escribe your unexpired p	ersonal property leases		Will the lease be assumed?
Le	essor's name:			☐ No ☐ Yes
	escription of leased operty:			*Annound*
Le	essor's name:			No Yes
	escription of leased operty:			Processor 2
Le	essor's name:			No Yes
	escription of leased operty:			- Speciment
Le	essor's name:			☐ No ☐ Yes
	escription of leased operty:	Xx		General
Le	essor's name:			☐ No ☐ Yes
	escription of leased operty:			
Le	essor's name:			No Yes
	escription of leased operty:			
Le	essor's name:			No Yes
	escription of leased operty:			
Paril Ox	Sign Below	atendre a tilm at verti erre erre era va verenne må seke a men til eve verenne en en er		
Und proj	ler penalty of perjury, I d perty that is subject to a	eclare that I have indicated r n unexpired lease.	my intention about any p	roperty of my estate that secures a debt and any personal
			1	MONG
	/s/ Michael Thompson Signature of Debtor 1		× // Şign	May Mandaghabute
C	Date 4/28/2017 MM/DD/YYYY		Date	MM/DD/YYYY

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 67 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Thompson, Michael	Case No			
	Debtor(s)	Case No.	Case No.		
		Chapter.	Chapter7	**************************************	
	VERIFICAT	TON OF CREDITOR MAT	TRIX		
knowle	The above named Debtors hereby verify that edge.	t the attached list of creditors is to	ue and correct to the best o	f their	
Date:	4/28/2017	/s/ Thompson, I		Sharel	
		Thompson, Mic Signature of Del			

Case 17-13411 Doc 1 Filed 04/28/17 Entered 04/28/17 12:25:06 Desc Main Document Page 68 of 68

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Michael Thompson	Case No.		
	Debtor		(If known)	
		Chapter	Chapter 7	
		ENSATION OF ATTORNE		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection w ith the bankruptcy case is as follows:			
	For legal services, I have agreed to accept		\$1,300.00	
	Prior to the filing of this statement I have received	ed	\$0.00	
	Balance Due		\$1,300.00	
2.	The source of the compensation paid to me was	:		
	Debtor	Other (specify)		
3.	The source of the compensation paid to me is:			
	✓ Debtor	Other (specify)		
 I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 				
				5.
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;			
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;				
6.	By agreement with the debtor(s), the above-disc	losed fee does not include the following servi	ices:	
		CERTIFICATION		
	certify that the foregoing is a complete statemen or(s) in this bankruptcy proceedings.	t of any agreement or arrangement for payme	nt to me for representation of the	
	4/28/2017	/s/ Corey Walters		
	Date	Signature of Attorney		
		Semrad Law Firm		
		Name of law firm		